

**California Work Opportunity and Responsibility to Kids (CalWORKs) Home
Visiting Initiative (HVI)
Frequently Asked Questions (March 2019)**

The following questions and answers are intended to assist counties administering the CalWORKs Home Visiting Initiative.

I. FUNDING/CASELOAD

Q: Will there be a rollover authority provision if a county is unable to spend their allocation within the first six months (before June 30, 2019)?

A: CDSS will request rollover authority in the late spring. At this time, roll-over authority cannot be guaranteed.

Q: Is the funding for HVI Federal TANF money?

A: HVI is funded with a combination of Federal TANF and State General Fund.

Q: Is the allocation for case managing or to provide supportive services (ancillaries)?

A: The allocation will be used for case management provided by the home visitor and supportive services as well. Case management provided by the regular Welfare-to-Work case manager will be claimed to the Single Allocation. Employment Services related to HVI will also be claimed to the Single Allocation.

The HVI allocations, CFL Nos. [18/19-50](#) & [18/19-51](#), are used to provide HVI related case management and supportive services guidance. CFL 18/19-50 discusses the HVI augmentation to the Employment Services component of the CalWORKs Single Allocation. CFL 18/19-51 informs counties of their CalWORKs HVI allocation for Fiscal Year 2018-19.

Detailed claiming instructions for HVI related services can be found in [CFL No. 18/19-49](#).

Q: If a CalWORKs client, who is federally funded while on aid, discontinues CalWORKs but chooses to continue in the CalWORKs HVI, will the funding switch to state?

A: Yes. Because federal Temporary Aid for Needy Families (TANF) funds meeting the first two purposes of TANF would be spent only on needy cases (45 CFR 260.20, TANF Q & A Use of Funds), if the case were federally eligible while receiving CalWORKs and the CalWORKs discontinued, continued funding for HVI services would need to come from a different source. The costs for this case

should be charged to the appropriate TSC or PIN associated with PC 426 (HVI Non-Federal Non-MOE).

Q: Can Targeted Case Management be leveraged?

A: While there is no match requirement for the HVI program, we encourage counties to leverage other funding streams as allowable to serve CalWORKs families.

Q: Is the projected population listed in the Request for County Plan for the initial 6-month period of 01/01/2019-06/30/19 or for the 18-month period of 01/01/2019-06/30/2020? If the number is for the 6-month period, will counties have the ability to revise their numbers since because of the delay of the receipt of the County Fiscal Letter, many counties will not implement until March or April, which only allows for 3 months to serve families.

A: If a county did not submit the caseload number for an 18-month period; and the County anticipates not beginning service implementation prior to or on 4/1/19 they may request to adjust their caseload numbers in writing to CDSS.

II. CLAIMING

Q: When claiming administrative costs for a sub-recipient, if a case is in a mixed household should the case be considered fed or non-fed?

A: HVI services should follow the eligibility of the parent. If a two-parent household consists of mixed eligibility for the parents, counties have the option of breaking out the eligibility of each parent in determining where that parent's costs would be claimed (federal, non-federal, or non-federal non-MOE), and claim non-parent specific HVI services based on the eligibility of the primary HVI participant. Alternatively, counties may claim all HVI costs and services to the non-federal Program Code (PC) 426 (HVI Non-Federal).

Q: Do the home visiting contractors need to complete time studies?

A: How the home visiting agency will report its costs to the county will first depend on whether the home visiting agency is considered a sub-recipient or a contractor. Please see CFL No. 18/19-49, dated January 30, 2019, for more information about determining if the home visiting agency is considered a sub-recipient or a contractor. If the home visiting agency is a sub-recipient, they will need to have a way of identifying their administration costs separately from any program services costs to the county, as the county must claim the sub-recipient's administration and non-administration costs separately. This may be accomplished through their own internal time studies, but how the sub-recipient will track their costs should be decided between the sub-recipient and the county and outlined in the Memorandum of Understanding. Sub-recipients will not time study directly to county time study codes; costs associated with sub-recipient

personnel time will still be reported as a direct cost to PINs ending in either TOE code 70 or 71. If the home visiting agency is a contractor, they will only be providing a service for the HVI program, not administering the program itself; therefore, a contractor may only identify their costs within the scope of their contract and report them based on whether the client was employed or unemployed. The county will then charge the contractor's costs to PINs utilizing TOEs 31 (Contract Activities Unemployed) and 32 (Contracted Activities Employed).

Q: When or where can I find more information on the required Time Study documentation and the invoicing process?

A: General time study instructions and explanations of time study methodologies are available in the Program Code Description manual and the California County Welfare Department County Cost Allocation Plan. Time study codes established for the HVI are available in CFL No. 18/19-49. Counties should follow time study documentation and invoicing processes for the HVI that are consistent with processes and claiming for other programs.

Q: How do we capture training if it is to be on a ratio? There is not a separate training code to capture training time separate from other admin tasks. How do we identify training time study hours in order to do the ratio?

A: Training costs incurred before caseloads have been determined may be charged to Program Code (PC) 422 (Home Visiting Initiative [HVI] Federal). As training costs are non-administrative in nature, for training provided to county workers who will be acting as home visitors, the county should claim trainer costs to the staff development page of the County Expense Claim (CEC) and trainee costs to Time Study Code (TSC) 4222 (HVI Federal Service Delivery). The costs of training provided to home visitors through a home visiting agency should be charged to either Program Identifier Number (PIN) 422071 (Sub-recipient Non-Admin) in the case of a sub-recipient providing training to its visitors or PIN 422031 (HVI Federal Contracted Activities Unemployed) in the case of a contractor providing training to its visitors.

For instructions on how to claim training costs after caseloads have been established, please review the Administration Costs and Training Costs sections of CFL No. 18/19-49. If the county provides training to county workers who will be acting as home visitors, the counties should claim trainer costs to the staff development page of the CEC using the appropriate HVI PCs. Though training costs are non-administrative in nature, they must be allocated similarly to administration costs because they are not case specific. Therefore, trainee time should be time studied to the appropriate HVI non-admin TSCs. Both trainer and trainee costs should be claimed in proportion to the HVI caseload of the county, similar to the method used to allocate and claim county administration costs. The costs of training provided to home visitors through a home visiting agency

should be charged to PINs ending in either TOE codes 71 (Sub-recipient Non-Admin) or 31 (Contracted Activities – Unemployed) and 32 (Contracted Activities – Employed) of the appropriate program codes in proportion to the HVI caseload of the agency, similar to the method used to allocate and claim home visiting agency administration costs.

Q: Do we combine all of the three admin time study codes and then break them back up according to the ratio of casework?

A: Yes, counties should take the total hours spent on HVI administrative activities during a period of time (which they may track in a manner of their own choosing) and claim them to the HVI admin TSCs based on a ratio of the caseloads for the various populations (federal, non-federal, and non-federal non-MOE) during that period. Please see the Administration Costs section of [CFL No. 18/19-49](#) for examples.

Q: Can CDSS clarify and provide a list or chart of CalWORKs aid codes that can be served by CalWORKs HVI?

A: HVI services are not limited to whether the participant is part of a one or two parent household, nor even a current recipient of CalWORKs. If the CalWORKs case is discontinued, the participant may continue to receive HVI services for the remainder of their 24-month service period or until they voluntarily terminate services ([All County Welfare Director's Letter \[ACWDL\] dated July 31, 2018](#)). For this reason, all CalWORKs aid codes have the potential to be served by the HVI program. Please review the list of aid codes available in the [Department of Health Care Services' Aid Codes Master Chart](#) for the complete list of aid codes.

III. DATA AND EVALUATION

Q: What data measures will be collected specific to the CalWORKs objectives?

A: The CDSS is currently engaging in discussions with independent research-based program evaluators. Once an evaluator is selected, they will work with the CDSS and other stakeholders to create data and outcome measures. This evaluation will be separate from the monthly HVI reports.

Q: When will the HVI data report form be released?

A: The CDSS continues to work internally to finalize the HVI report form. Once finalized, the CDSS Research Services Branch will release the form with instructions through an All County Letter. After the release, the report will be due on the 5th calendar day of the second month following the report month. For example, the July 2019 report will be due on September 5, 2019.

Q: Who is required to turn in the monthly data report (DSS or Public Health)?

A: The All County Letter releasing the data collection report will be sent to county welfare directors. It will be the county welfare department's responsibility to ensure that the report is submitted. Counties are reminded to clarify the roles and responsibilities of all the agencies involved in their MOUs/Data Sharing Agreements in order to ensure there is no duplication of information.

Q: When a CalWORKs case discontinues, but a client continues to participate in the HVI are counties required to track them on the Data Reporting?

A: Yes.

Q: Should we expect many changes to the draft outcomes tool?

A: There will be changes to the form based on input from stakeholders. However, many of the data elements to collect caseload information and information on referrals and services are similar to the first draft that was released in November 2018. Most of the changes focus on providing clarification.

Q: Were demographic data reporting requirements permanently removed from the data reporting form (e.g. sexual orientation, gender identity)?

A: Demographics have been removed from the monthly data collection report. The department has identified other methods for collecting this information as it is required.

Q: Will there will be an external evaluator who will be evaluating all counties? If so, will counties be able to contribute to the evaluation plan?

A: Yes, AB 1811 mandates that an evaluation of the HVI occur in the first 3 years of the program with a report due to the legislature by January 10, 2022. A stakeholder group will be convened upon finalizing the evaluator contracting process. For reference please see: [WIC 11330.8 \(d\)\(1\)](#).

Q: Where do customers who are no longer on aid get counted – there is no column for them?

A: CDSS requires each county to continue counting any HVI participant that exits the CalWORKs program in the same column they were determined eligible until completion of the evidence-based home visiting model.

As the HVI can serve clients for up to 24 months or until their child turns 2 years old (whichever is longest), it is possible that a client's eligibility may change. When a client moves from being aided to no longer being aided, this client should be counted in the population that they were most recently assigned. For example, if the client was WTW eligible when they began services, and then

became ineligible due to income, data will continue to be collected under the population “WTW eligible”.

Q: When a Home Visitor drives out to a home and customer is not there, how is that counted (completed, declined...)? What about interrupted visits – how are these to be counted?

A: The CDSS has added the data element, Home Visits Attempted (but not completed), to capture such an incident. Interrupted visits should be based on the discretion of the home visiting model in order to promote fidelity of the evidence-based model.

Q: Does report data build on itself month over month (new tabs)?

A: The CalWORKs HVI data collection report is a monthly aggregate report. Some items will be reported the first time they occur only, and others will be cumulative.

Q: Will you be adding a column to Part B for not-first time parents (participating after having subsequent children while enrolled in HVI)?

A: A non-first-time parent is not part of the target population and would be counted in the expanded population column.

Q: Will Family Stabilization (FS) be included in Part C?

A: Family Stabilization will not be a separate data element in Part C of the report. If a home visitor reports that they have referred an HVI client to family stabilization, the county can count it in the “Individuals referred to other services” item 25N.

Q: The final two sections in Part B ask about WTW activities/participation. Is this to include all participants ENROLLED in WTW activities, or only those who show proof of PARTICIPATION?

A: The CDSS has revised this item to collect data on those HVI participants who are required to participate in welfare-to-work activities and those who are exempt. Neither require proof of participation.

Q: Should counties track dual-eligible kids? Enrolled in other programs, outside of HVI – but having to do with the programs key components like education/nutrition/etc.?

A: The CDSS requests counties only include children who are enrolled in the CalWORKs HVI on the HVI form.

Q: As to the 24-month program period, we understand that services will be provided to the first child/Parent for a full 24 months from the time of enrollment (based on eligibility). Say Mom enrolls with a 1-year old child

and is pregnant. Once the first child reaches 2 years of age is the family discontinued OR can she continue to participate up to the 24-month program limit with the second child? (Is the “program period” based on the child’s age, total enrollment time, or something else?)

A: The CDSS has revised language in the instructions to clarify how to count the first-time parent. The following language is now included in the instructions:

“Count the first-time parent from enrollment up to 24 months or until the first child’s second birthday, whichever is later.”

Q: Is documentation of referrals to community resources required to be kept on file, or simply a case note?

A: This is left to the counties determination - For the purposes of data collection, the definition of a referral is when the home visitor provides information on a specific resource to the individual receiving home visiting services. Documentation of referrals to all organizations must be captured on the data form. Additionally, the referrals should be tracked in line with the evidence-based model’s current standards. It is left to the discretion of the county if the referral is kept on file or in case notes.

Q: For two parent households, whose eligibility/WTW status should we use if both parents do not have the same status? Example: One Parent is WTW Eligible and the other is exempt, or one is WEI and the other is not?

A: Counties should count WTW Eligible and exempt in the WTW eligible column as the exempt status does not change the members of the assistance unit. Child only cases would include parents who are ineligible due to immigration status, receipt of SSI, or are non-needy parental caretakers. The Cal-Learn column is only for Cal-Learn recipients and expanded population is for all HVI participants that do not meet the target population described below.

The target population are individuals who are pregnant and have no other children when enrolled in the program or the individual is a first-time parent or caretaker relative of a child less than 24 months of age at the time he or she enrolls in the program, WIC 11330.6 (c)2(B)(i).

The CalWORKs HVI data collection tool records information about the individual. If two parents are receiving home visits, and they have different eligibility status, each parent may be represented separately on the data collection tool.

IV. PROGRAM

Q: What are the requirements for a caretaker relative to be eligible to HVI?

A: A voluntary participant for the CalWORKs HVI needs to be a member of a

CalWORKs assistant unit, or the parent or caretaker relative for a CalWORKs child only case.

Q: Can a caretaker relative have his or her own child or does he or she have to be a first-time caretaker of a child less than 24-months with no other children?

A: Based on Section 11330.6(c)(2) of the Welfare and Institutions Code, a caretaker relative of a child less than 24 months of age at the time he or she enrolls in the program is eligible for the CalWORKs HVI. The caretaker relative does not have to be a first-time caretaker relative to be eligible.

Q: Is there any concern or preference which data collection system (PIMS, ETO) is used by our contractor?

A: The CDSS has no preference for which data collection system is used for each home visiting model in counties. It is each County's responsibility to meet all CDSS data collection requirements and work with the CalWORKs HVI evaluator.

Q: We understand that 4/1/19 is the required implementation date for the HVI program. However, is it the expectation that home visitation staff will be ready for home visitations to begin on that date, OR rather, is the expectation that staff must be hired and in training as of that date?

A: The CDSS is aware that counties may experience implementation delays for a new program such as the HVI. We encourage our county partners to continue to aim to start offering home visiting services no later than April 1, 2019 but are aware that it may not be feasible.

Q: If the County opts to use a referral system between County departments to determine program eligibility, and a subsequent denial notice is necessary (to be sent to the customer), is standard language required (NOA)?

A: Counties should note WIC 11330.6 (a) (2) states "A voluntary participant shall meet all of the following criteria: the individual is a member of a CalWORKs assistance unit, or the parent or caretaker relative for a child-only case."

If the customer is found not eligible for CalWORKs or the Home Visiting Initiative target or expanded population then; Yes, counties should use the existing process for notifying customers they are not eligible for CalWORKs with the standard language requirement (NOA).

If the customer is not eligible, counties should use the established referral systems to link customers to other available and appropriate home visiting services.

Q: If a HVI participant chooses to leave the HVI program (with or without cause), and wants to return to the program at a later date (with or without and active CW case) but within the original 24-month period, is this allowed?

A: If a client chooses to leave the HVI program, but remains on CalWORKs, then the client may return to the HVI program within the original 24-month period to the extent funds are available and the evidence-based model allows.

However, if a client chooses to leave the HVI program, and is no longer on CalWORKs, then they are unable to return to the home visiting program.

For participation requirements please also see WIC 11330.6 (d)(2) "Participation in the program shall be offered in writing to an eligible parent or caretaker relative. A document that includes a description of the program, its anticipated benefits and duration, a description of how to opt into the home visiting program, and a description of how to terminate participation shall be given to the parent or caretaker relative."

Further guidance and templates can be found in the CDSS released All County Welfare Director Letter titled: "Additional Guidance for Implementing CalWORKs HVI."

Q: If a participant stops participating in the program, including visitation or referral services, at what point can counties discontinue HVI services and enroll a new family?

A: The determination for discontinuing services should be taken from the implemented home visiting model. Counties are also advised to refer to the evidence-based home visiting program requirements for visitation, and termination.

Also, for CalWORKs HVI termination requirements Counties are directed to see WIC 11330.6 section (d) (5) "If the parent or assisted care taker has been removed from the assistance unit or exits the CalWORKs program, voluntary home visiting services may continue until completion of the evidence-based home visiting program or until he or she terminates his or her own participation."

Q: Clients are eligible to participate in HVI for 24 months or the child turns 2 whichever is later. For those clients whose exemption for WTW has ended and become mandatory, are counties required to incorporate the HVI activities into a WTW plan (WTW 2) for the client.

A: Yes. As per WIC Section 11330.6(d)(3) and WIC Section 11330.7(c), both home visiting session hours and volunteer hours in an early learning setting must be incorporated into the WTW plan for required WTW clients.

Q: Are counties able to use an alternative name for the program that emphasizes the collaboration of the CWD, Public Health Department and home visiting agency? The name would be used on outreach material to attract volunteers for the program. The intent on using an alternative name would be to make the program more inviting to the population we are wanting to serve by better explaining the services that are offered through the program and benefits of participation. In addition, “Home Visiting” may have a negative connotation for some families and the name does not provide a clear idea of the intent of our program. For all other purposes, we would still refer to the program as the CalWORKs Home Visiting Initiative.

A: Yes. A county may use an alternative name for the program. If a county chooses to use an alternative name, they shall include the following language on the document/form/flier. *“Funding for this program is provided by the California Department of Social Services CalWORKs Home Visiting Initiative.”*

Q: If a client has other children but lost parental rights to them and now pregnant or have a child less than 24 months, are we required to ask them if this is their “first child”?

A: If pregnant with no other child in the home (because the child was removed by CPS), then yes, client can be served by target population; otherwise client would be served as part of an expanded population (e.g. not pregnant, but has a child under 2 in the home and has had other children removed by CPS).

V. ELIGIBILITY

Q: Can you please clarify, if the entire cash aid case closes for both participant and children, is the family still eligible for HVI?

A: Yes, if the parent or assisted caretaker has been removed from the assistance unit or exits the CalWORKs program, voluntary home visiting services may continue until completion of the evidence-based home visiting program or until he or she terminates his or her own participation. For reference please see [WIC 11330.6\(d\)\(5\)](#).

VI. TRAINING

Q: Could you please clarify what you mean by ongoing training?

A: “Ongoing training” equates to the frequency an agency or county should provide training for HVI Home Visitors. Trainings that are required to be offered on an “ongoing” basis are to be offered on a continual basis to accommodate staff attrition and turnover (i.e. 3-4 times annually). For home visitor training frequency

requirements, each county shall refer to their evidence-based home visiting model requirements.

Q: Please clarify if offering of training ongoing is the same as annually?

A: No, ongoing training is defined as the offering of training on a continual basis.

Q: If the home visitor during a home visit provides the customer with a phone number to gain direct access to an expert who can troubleshoot issues with their CalWORKs, Medi-Cal, or CalFresh case; would this satisfy the training requirement?

A: Welfare and Institution Code 11330.7(g) (1) states “All home visiting providers shall complete training in the following areas before providing services to a CalWORKs recipient: CalWORKs, Medi-Cal, CalFresh, California Special Supplemental Nutrition, Program for Women, Infants, and Children (WIC), and other programs, with county-specific information about how the home visiting professionals can help a parent access additional services for which he or she may be eligible and troubleshoot problems with benefits or eligibility that would impact his or her access to services.”

Direct access through a phone call cannot substitute the home visiting required training.

Q: Will you offer a sample self-assessment format?

A: The CDSS encourages counties to reference the citations on the training requirements listed in Attachment B of the ACWDL. CDSS also encourages counties to share best practices in utilization of self-assessments surveys or practices.

Q: When will home visitor training requirements be available?

A: The Home Visitor training requirement will be included in an upcoming ACWDL.

Q: Can you say more about the disproportionality training requirement? What is this?

A: Disproportionality occurs when a particular racial or ethnic group is overrepresented in a social program, a negative measure, or an adverse situation as compared to their representation in the overall population. This mismatch in representation often results from disparity in access to resources, education, culturally sensitive programming and policy, or structural bias.

The information provided in the training must discuss the impacts of disparity in child welfare reporting on cultural groups that are most effected.

VII. CONTRACTS AND MEMORANDUM OF UNDERSTANDING (MOUs)

Q: Will the counties receive an acknowledgement of receipt of our MOU and Data Sharing Agreements?

A: The CDSS will send a confirmation email to counties who have submitted their MOUs/Data Sharing agreements.

Q: If the primary applicant was the county's Department of Public Health (DPH), is an MOU/formal agreement with the County Welfare Department required?

A: Yes. If the primary applicant was the county Department of Public Health, an MOU/Data Sharing Agreement is required with the County Welfare Department.

Q: When will the MOU's/agreements be approved? Our county takes 4-6 weeks to process agreements through our legal department and then our Board of Supervisors.

A: The MOUs/Data Sharing Agreements are between the DPHs and CWDs and their contractors. After your MOUs are approved locally, counties are required to submit them to the CDSS.

Q: Please clarify if the data sharing agreement has to be a separate document or if it can be part of the MOU.

A: The data sharing agreement can be included as part of the Memorandum of Understanding.

Q: Can a contract partner sub-contract some services to increase program capacity?

A: The selection and contractual details for local county collaborative or contractual partners should be decided by the local County Welfare Department or lead County agency. This contract shall adhere to the requirements of the selected evidence-based model and the overall HVI requirements established by [WIC 11330.9-11330.9](#).

Q: Will counties be required to submit a copy of their MOUs with the home visiting providers for each fiscal year or solely at implementation?

A: If a county's MOU is not amended during the application cycle (January 2019 – June 2020), then they do not need to resubmit their MOUs annually. A county will have to submit their MOUs every application cycle.

VIII. MATERIAL GOODS

Q: Can the one-time only \$500 be used to purchase items intermittently over time, or does it have to be a one-time lump sum of items for each family?

A: [Welfare and Institutions Code 11330.7\(h\)](#) states that the \$500 material goods funding is available only one-time to HVI participants but does not state that it must be spent all on one item or all at one time. Accordingly, this money may be spent over length of the HVI client's participation in the program. Counties are reminded that the funding amount is one time per case and does not reset annually or otherwise.

Q: So diapers would work for the \$500 cost?

A: If the family requires diapers or has other material needs and there are no other available funding mechanisms to meet these needs, those needs would be an appropriate use of the \$500 for material goods. However, the funds for the HVI are not intended to supplant any existing funding sources for services (ACWDL dated July 31, 2018). For example, if a parent is or begins participating in a Welfare to Work (WTW) plan, that parent is eligible for \$30 per month for diapers per child under the age of 36 months (refer to ACL No. 18 38, dated March 28, 2018, and CFL No. 17/18-57, dated March 30, 2018). In such a situation, the \$500 material goods funds should not be used to provide this service to a parent who is eligible for that diaper supportive service through WTW.

Q: How is the \$500 tracked for each family? Does the home visiting program provide the goods or does the CalWORKs case manager supply the goods?

A: The \$500 should be tracked in the case documentation. Counties have the flexibility to decide how to track the \$500 material goods. The home visitor should provide the material goods to the client after assessing the family's needs.

Q: If a family is receiving HVI services after they leave CalWORKs cash aid, can they still receive the \$500 for material goods?

A: Yes, if the parent or assisted caretaker has been removed from the assistance unit or exits the CalWORKs program, voluntary home visiting services may continue until completion of the evidence-based home visiting program or until he or she terminates his or her own participation. For reference please see [WIC 11330.6\(d\)\(5\)](#). Therefore, if the parent is continuing in the HVI program they would still be eligible for HVI services including the \$500 material goods. For reference please see: [WIC 11330.7\(h\)](#).

Q: If a family is in receipt of the \$30 Diaper Ancillary Supportive Service, would counties still be able to provide diapers as part of the material goods that can be purchased?

- A: The \$30 Diaper Supportive Service is intended as a work support to parents and caregivers participating in WTW activities. Material goods are not held to that same criteria. Provided that material goods do not supplant the funds allocated to the family for the diaper supportive service and the family does require diapers in excess of what the \$30 per eligible child per month affords the family, then using additional funds from the material goods is allowed for the purpose of purchasing diapers.

IX. MISCELLANEOUS

- Q: Regarding HVI participation and its ability to count for WPR purposes, such as “Job Skills Related to Employment,” how should it be indicated on the WTW2/contract and what are the tracking requirements?**

- A: Tracking requirements in the HVI are not intended to be any different than what is already operationalized within the county and would follow the same parameters in HVI as they would outside of the HVI.

Assigning Hours with a Home Visitor in the WTW Plan

In developing the client’s WTW plan, hours spent with the home visitor must be assigned as “Other activities necessary to assist an individual in obtaining unsubsidized employment” [MPP Section 42-716.1(r)], when the client is not already receiving Domestic Abuse Services. This is an allowable activity for CalWORKs minimum standards.

When the client is already receiving Domestic Abuse Services (MPP Section 42-715), hours spent with the home visitor may also be considered Domestic Abuse services, specifically as it relates to parenting skills training and/or independent living skills training. Domestic Abuse services is an allowable activity for CalWORKs minimum standards and, as per MPP Section 42-709.316(a), for four consecutive weeks, not to exceed six total weeks in a 12-month period, as Job Readiness for CalWORKs federal standards.

Assigning Hours Volunteering in an Early Learning Setting in the WTW Plan

For the development of the client’s WTW plan, where the client volunteers time in an early learning setting, the CWD must assign these hours as Community Service [MPP Section 42-701.2(c)(5)], Work Experience (WEX) [MPP Section 42-701.2(w)(4)], and/or Job Readiness Assistance [MPP Section 42-701.2(j)(3)].

- Q: Will there be a separate webinar on the fiscal tracking piece for HVI, so that counties can invite their fiscal staff to participate?**

- A: There is no webinar planned for the HVI claiming instructions at this time. After reviewing the claiming instructions in CFL No. 18/19-49, questions about the claiming instructions may be directed to fiscal.systems@cdss.ca.gov.

Q: Are the latest versions of the materials being referenced available online?

A: Yes. All the Letters and Notices pertaining to HVI can be found by clicking the following link: [CalWORKs Home Visiting Initiative](#). In order to receive a copy of all HVI materials (including the county application), please submit a request to CalWORKsHVI@dss.ca.gov.